

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																																											
1 Date of Request: <u>12-1-98</u>		2 Serial/Patent # <u>09/185663</u>																																									
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr><td style="width: 50%; padding: 2px;">Filing</td><td style="width: 15%; padding: 2px;"></td><td style="width: 15%; padding: 2px;"></td><td style="width: 20%; padding: 2px;">\$ <u>1364</u></td></tr> <tr><td style="padding: 2px;">Amendment</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$ <u>1</u></td></tr> <tr><td style="padding: 2px;">Extension of Time</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Notice of Appeal/Appeal</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Petition</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Issue</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Cert of Correction/Terminal Disc.</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Maintenance</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Assignment</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> <tr><td style="padding: 2px;">Other</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;">\$</td></tr> </table>	Filing			\$ <u>1364</u>	Amendment			\$ <u>1</u>	Extension of Time			\$	Notice of Appeal/Appeal			\$	Petition			\$	Issue			\$	Cert of Correction/Terminal Disc.			\$	Maintenance			\$	Assignment			\$	Other			\$	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$ <u>1364</u>																																								
Amendment			\$ <u>1</u>																																								
Extension of Time			\$																																								
Notice of Appeal/Appeal			\$																																								
Petition			\$																																								
Issue			\$																																								
Cert of Correction/Terminal Disc.			\$																																								
Maintenance			\$																																								
Assignment			\$																																								
Other			\$																																								
7 TOTAL AMOUNT OF REFUND		\$																																									
8 TO BE REFUNDED BY: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 50%; padding: 2px;"> 10 REASON: <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Overpayment</td></tr> <tr><td style="padding: 2px;">Duplicate Payment</td></tr> <tr><td style="padding: 2px;">No Fee Due (Explanation):</td></tr> </table> </td> <td style="width: 50%; padding: 2px;"> Treasury Check Credit Deposit A/C #: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">4</td> <td style="width: 20px; text-align: center;">8</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">0</td> </tr> </table> </td> </tr> </table>				10 REASON: <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Overpayment</td></tr> <tr><td style="padding: 2px;">Duplicate Payment</td></tr> <tr><td style="padding: 2px;">No Fee Due (Explanation):</td></tr> </table>	Overpayment	Duplicate Payment	No Fee Due (Explanation):	Treasury Check Credit Deposit A/C #: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">4</td> <td style="width: 20px; text-align: center;">8</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">0</td> </tr> </table>	0	2	--	4	8	0	0																												
10 REASON: <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Overpayment</td></tr> <tr><td style="padding: 2px;">Duplicate Payment</td></tr> <tr><td style="padding: 2px;">No Fee Due (Explanation):</td></tr> </table>	Overpayment	Duplicate Payment	No Fee Due (Explanation):	Treasury Check Credit Deposit A/C #: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">4</td> <td style="width: 20px; text-align: center;">8</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">0</td> </tr> </table>	0	2	--	4	8	0	0																																
Overpayment																																											
Duplicate Payment																																											
No Fee Due (Explanation):																																											
0	2	--	4	8	0	0																																					
11 REFUND REQUESTED BY: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 60%; padding: 2px;"> TYPED/PRINTED NAME: <u>Roxanne Rawls</u> </td> <td style="width: 40%; padding: 2px;"> TITLE: <u>LIE</u> </td> </tr> <tr> <td style="padding: 2px;"> SIGNATURE: <u>Roxanne Rawls</u> </td> <td style="padding: 2px;"> PHONE: <u>308 9481</u> </td> </tr> <tr> <td colspan="2" style="padding: 2px;"> OFFICE: <u>DIPG TY</u> </td> </tr> </table>				TYPED/PRINTED NAME: <u>Roxanne Rawls</u>	TITLE: <u>LIE</u>	SIGNATURE: <u>Roxanne Rawls</u>	PHONE: <u>308 9481</u>	OFFICE: <u>DIPG TY</u>																																			
TYPED/PRINTED NAME: <u>Roxanne Rawls</u>	TITLE: <u>LIE</u>																																										
SIGNATURE: <u>Roxanne Rawls</u>	PHONE: <u>308 9481</u>																																										
OFFICE: <u>DIPG TY</u>																																											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: _____ DATE: _____																																											

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: